

Building Code

_____ 2006 International Residential Code

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Estimated Cost:**COUNTY OF MADISON, VIRGINIA****Permit No.** _____

BUILDING DEPARTMENT

\$ _____

***APPLICATION FOR BUILDING PERMIT**

NAME of OWNER:					()	
Mailing Address:						
9-11 Address:						
PROPERTY LOCATION		Road	Tax Map	Block	Section	
Subdivision	Lot #	Lot Size	Frontage	Zoning		
BUILDING DATA Type of Construction: I() II() III() IV() V()						
Proposed Use:						
() Accessory Structure () Addition () Manufactured Home (Yr.) Size: X						
() Single Family () Remodeling () Other: No. of Floors Finished sq. ft.						
Bedrooms:		Baths:	Other:	Porch/Deck sq.ft.		
Garage: () Attached () Detached		Garage Size: X		Total sq. ft.		
Interior Wall Construction:			Exterior Wall Construction:			
Central Air:		Heat:	Flue:	Fireplace:		
Type Roof:						
Basement: () finished () unfinished () crawl space		Total sq. ft.				
Domestic Water: () Individual () Public		Sewerage: () Individual () Public				
BUILDING CONTRACTOR Phone: ()						
Address:			License #:		Expiration Date:	
ELECTRICAL CONTRACTOR: Phone: ()						
Address:			License #:		Expiration Date:	
PLUMBING CONTRACTOR: Phone: ()						
Address:			License #:		Expiration Date:	
HVAC CONTRACTOR: Phone: ()						
Address:			License #:		Expiration Date:	
OTHER CONTRACTOR: Phone: ()						
Address:			License #:		Expiration Date:	
OTHER CONTRACTOR: Phone: ()						
Address:			License #:		Expiration Date:	

X _____
Signature of Owner or Agent_____
Date

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of this jurisdiction.

*** If a well is being drilled, a well log must be submitted to the Building Inspections Department before the building permit can be issued.**

DEPARTMENT USE ONLY:**Plan Review Fee**

Total square footage (finished and unfinished space) _____ x \$.02 = _____